Remarks of U.S. Representative John E. Fogarty
Panel on Health for Peace,
Citizens Committee for World Health Organization
Mayflower Hotel, September 25, 1963

I am pleased to participate in this panel discussion, particularly in view of the illustrious company comprising the panel and the importance of the subject matter, namely, Health for Peace.

Five years ago I introduced into the House of Representatives a bill (H.J. Res. 698) as a companion bill to the measure introduced in the Senate by Lister Hill (S.J. Res. 41) which was known as the Health for Peace legislation. These bills proposed providing broad authorities to the Surgeon General and the Public Health Service to extend medical research on an international basis and to otherwise provide for international exchange in the health sciences. Personally, I have had a long-term, intense interest in matters relating to international health and scientific exchange amongst nations because of their significance both for the solution of health problems and as a contribution to peace.

The original Health for Peace legislation had as its objectives three major concepts:

<u>First</u>--Support of medical research outside of the borders of the United States is of great importance to the advancement of our national health programs because of the many scientific opportunities presented by the differing character of disease and health problems in other countries, the existence of unique scientific talent and

facilities abroad and the importance of expanding on an international basis the research attack upon disease problems of major
concern.

Second--The development of the medical sciences in the United States requires close and intimate relationship with scientific activity and medical research in other countries. The United States, because of its leadership in this field, could do much to advance the international status of the health sciences and thereby engender broad progress in the field of health generally through collaboration with foreign institutions and investigators in medical research.

Third—Research directed towards the solution of the disease and health problems of man on an international basis constitutes a powerful force for mutual understanding among nations. This is a prime work of peace and one in which this Nation should be in the forefront.

The above ideas motivated the affirmative Congressional action on this legislation, however, in this process the terms of the original proposals such as had been introduced by Senator Hill and myself were substantially modified. The legislation, as finally enacted in Public Law 86-610--"The International Health Research Act of 1961"--made clear distinctions between the purposes for which the United States would provide support for foreign research and scientific activities:

First--The Surgeon General of the Public Health Service was authorized to participate through grants and other cooperative arrangement with other countries in the furtherance of health research and research training for the purpose of advancing the health status of the people of the United States. This is the national aspect of foreign activities in this field.

Second--The President, on the other hand, was authorized to make grants and awards and to otherwise participate financially in international health research and research training activities to further the international status of the health sciences. This is the international aspect of the programs authorized by this legislation.

This latter authority was specifically reserved to the President. However, the legislation provided he could delegate such authority if he so chose to the Department of Health, Education, and Welfare. This delegation, although requested by DHEW, has never been acted upon by the President, a matter I shall discuss later.

Since the passage of this legislation there has been a substantial expansion in the international scientific activities of the Public Health Service. During fiscal year 1962 I am informed that the Public Health Service expended approximately \$30.0 million in support of a variety of international research and research training activities. The largest portion of this expenditure, \$17.5 million, has been directed towards the support of medical research by foreign institutions and investigators

through grants, contracts, and P.L. 480 agreements. Approximately \$11.8 million has gone for a variety of research training and fellowship programs, a major portion of which has been almost \$2 million for the support of U.S. nationals studying at advanced levels in foreign institutions.

The Public Health Service has participated extensively in providing substantial support to the research activities of the World Health Organization and the Pan American Health Organization. Apart from its extensive participation through staff assignment, technical consultation and exchange, the Public Health Service has contributed financially to both the development of the research capability and the conduct of research programs by these two organizations. All of us will remember the initial award in 1958 of \$300,000 to the World Health Organization for the beginning of its research program. Similarly, in 1961, a research planning grant was made to the Pan American Health Organization of \$150,000. These two awards have contributed extensively to the development of the international research programs of these two organizations. In addition, the Public Health Service has also supported, through a variety of project grants, individual research projects conducted by these two organizations. Current annual support to the research activities of these two organizations through PHS programs now is of the order of \$700.000.

The international scientific activity generated through the support provided by the Public Health Service under the provisions of P.L. 86-610 has most certainly had a profound effect upon the enlargement of knowledge

important in the health field and in the advancement of scientific effort in the medical sciences. However, I am now informed that this extraordinarily productive program is now confronted with problems which it may be worthwhile to discuss here today.

In the first place, we are all aware of the problems generated by the adverse balance of international payments with which the United States has been confronted. I have been told that as a result of this situtation efforts are being made to significantly reduce the extent of support being provided foreign institutions and investigators under the Public Health Service program. While the complexities of international balance of payments are difficult to comprehend fully, it does not seem to me to be sound policy to arbitrarily restrict and diminish the PHS program. It has resulted in extensive scientific achievement. It has contributed substantially to the foreign policy objectives of the United States through the leadership which the United States has assumed in this area of such great importance to all people. These programs must not be crippled because of a bad misassessment of their total benefits as contrasted with their insignificant effect on the balance of payments picture.

Another matter with which I must admit concern is the fact that the authorities made available to the President under P.L. 86-610 to further international scientific activity in the medical sciences have not yet been delegated. In terms of solutions for our domestic health problems and in terms of an enlightened foreign policy, international medical

research programs have the greatest potential for good. Reluctance to delegate the Presidential authority in this area has prevented the most effective exploitation of this potential.

I am personally of the conviction that through leadership in international medical research and research training activities the United States can contribute in a particularly meaningful and effective way to the solution of health problems specifically and to the cause of peace generally. I think, therefore, that we should make the fullest use of the legislation which, after extensive debate and consideration, was enacted by the Congress.

To restrict these programs, either through reduction in the funds made available to them or through the unwise separation of authorities in their conduct, will result in loss in the long run, both for our science and our international posture. The small amount of U.S. dollars exported under these programs are well spent. They are worth dollar for dollar many times the uncertain benefits of other forms of foreign aid.

Similarly, I urge delegation of the Presidential authorities under this legislation. I believe delay in this delegation prevents the development of a comprehensive, hard-hitting, unified program of U.S. participation in the advancement of the health sciences. Only through such a unified program can the objectives set forth by the President in his address on peace before the United Nations General Assembly be accomplished. In like manner, it will take unified effort to undertake the development of the specific programs that the President proposed

therein, namely, the establishment of a world center for health communications under the World Health Organization and the creation of regional research centers for collaborative international effort in medical research and training.

As Chairman of the Appropriations Subcommittee on Labor-HEW programs, I would be very much interested in seeing a separate appropriation request by the Executive Branch for international health research activities. The separate presentation of such a program could encompass the full scope of the activities envisaged in the International Health Research Act of 1961. In this way the Congress would have an opportunity to specifically and directly consider in a cohesive form these valuable and important programs in the context of both their meaning for U.S. health problems and their potential for further peaceful cooperation amongst nations.

In concluding my remarks I would like to set forth an idea and a view which I feel to be of the greatest importance and significance.

Instead of a curtailment of the programs and activities of the United States in the field of international health research, I should like to see a plan to bring into being at Bethesda a great international center for research in biology and medicine dedicated to international cooperation and collaboration in the interests of the health of mankind as so boldly envisaged by the President. This center would encompass conference

facilities, laboratory and study space, and living quarters to permit the assembly for discussion, study, and research of the outstanding health scientists of the world. I visualize this center associated with the great facilities of the NIH and the NLM as representing the visible and tangible embodiment of this Nation's devotion to the use of science for peaceful purposes and the good of mankind.